

July 25, 1988

Shipper 20089 Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest
Document No.

2. Page 1
of 1

Information in the shaded areas
is not required by Federal law.

3. Generator's Name and Mailing Address

F.M. Thomas
231 Gemini, Brea, CA

A. State Manifest Document Number

87118965

B. State Generator's ID

4. Generator's Phone ()

5. Transporter 1 Company Name

F. M. Thomas

6. US EPA ID Number

CAX 00 00 38 0 3 4

C. State Transporter's ID

D. Transporter's Phone

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

Omega Recovery Services
12504 E. Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number

C A D 04 2 245 001

G. State Facility's ID

CAD 04 2 24 500 1

H. Facility's Phone
213/698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

Hazardous waste Liquid NOS ORM-E NA 9189
(R-11)

12. Containers
No. Type

0 05 DM

13. Total
Quantity

1 500

14. Unit
Wt/Vol

P

I. Waste No.

State

211

EPA/Other

State

EPA/Other

State

EPA/Other

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

a. 01

c.

b.

d.

15. Special Handling Instructions and Additional Information

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

RONNIE BOYETT

Signature

Ronnie Boyett

Month Day Year

7 26 88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

RONNIE BOYETT

Signature

Ronnie Boyett

Month Day Year

7 26 88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Henry Sobran

Signature

Henry Sobran

Month Day Year

07 20 88

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-952-7550

GENERATOR

TRANSPORTER

FACILITY